

PROCEDURES LIST

This is a comprehensive list of procedures that an Emergency Medicine trainee will be expected to encounter and learn during the training program.

The trainee is expected to develop their ability as follows:

1. The trainee will be able to decide to conduct the procedure during their clinical assessment of the patient's presentation.
2. The trainee will be able to prepare the patient and equipment for the procedure, which includes consent and patient education.
3. The trainee will be able to technically perform the procedure.
4. The trainee will be able to manage any complications if they arise.

This document provides more detail for the third learning outcome (above). The learning outcomes for the other processes are covered elsewhere in the Curriculum Framework.

A **mastery key** has been created and a mastery level has been assigned to each stage of training for each procedure. It is expected that as a trainee progresses, each subsequent mastery level builds on the previous levels. Please note:

- The Levels of Mastery assigned to each procedure are matched to the top level descriptors in the Medical Expertise domain. This means a trainee can independently assess/manage the following types of patient presentations at the end of the following stages:
 - End PT: Common, low acuity, low complexity presentations (or initiate resuscitation)
 - End AT1: Common, high acuity, low complexity OR common, low acuity, high complexity presentations
 - End AT2: Common, high acuity, high complexity presentations
 - End AT3: Any emergency presentations
- The Levels of Mastery are minimum levels of competence.
 - All trainees should have achieved the assigned level of mastery by that stage of training
 - It is rarely possible to assign the highest level of mastery in this list. It is expected that further experience after training will allow the FACEM to continue to progress to the highest level.
 - Certain procedures may start at a relatively high Level of Master (e.g. cannulation)
 - It is acknowledged that levels may change (become higher OR lower) if the trainee trains in specific types of EDs for example paediatric only, rural, trauma centre, etc. The trainee should access learning resources to ensure that they achieve the assigned level of mastery by the end of training regardless of where they have trained
- It is acknowledged that these assigned mastery levels are based on the performance in non-challenging situations. Performance in challenging situations will alter the assigned mastery level.
- There are some procedures where a theoretical knowledge of the procedure is within the scope of Emergency Medicine but further mastery, although desirable, is not essential for core Emergency Medicine practice. For these procedures, the trainee only needs to reach the first mastery level on completion of training.
- With regard to progression through successive stages of training:
 - The Levels of Mastery are NOT an implied hierarchy of procedural importance.
 - Procedures that are life/limb/sight saving are listed and trainees are expected to achieve mastery level at least in simulation if real life opportunities to practice this procedure are rare. Level 4/5 equates to multiple opportunities in real life and in simulation to practice this skill. Level 3 equates to multiple opportunities to practice the skill in simulation. Level 2 equates to very few opportunities to practice the skill in simulation.
 - Progression through the Levels of Mastery does NOT need to be linear. Some procedures may not need intermediate Levels of Mastery.

CATEGORIES

C = this procedure occurs **commonly** enough for the trainee to achieve competence in the clinical situation by the end of training.

LS = this procedure is **life/limb/sight saving** and should be mastered, even if only in simulation.

MASTERY LEVELS

Code	Mastery Level	Description
1	The trainee will have theoretical knowledge of these procedures.	The trainee will be able to describe a procedure and its indications, contraindications and complications, and incorporate their knowledge of the basic sciences. The supervisor will perform the procedure with trainee observing or assisting.
2	The trainee will be able to perform these procedures under direct supervision .	The trainee will be able to perform the procedure with the supervisor observing or assisting. The trainee will plan consciously and deliberately before performing the procedure, and will follow standardised rules and routines.
3	The trainee will be able to independently perform these procedures.	The trainee will be able to perform the procedure without direct supervision. The trainee will be able to perform a single approach for the procedure.
4	The trainee will be able to proficiently perform these procedures.	The trainee will be able to perform more than one approach for the procedure. They will apply discrimination and discretion in selecting an appropriate approach for the situation. The trainee will occasionally draw on the experience or assistance of peers and check written or online resources as backup.
5	The trainee will be able to expertly perform these procedures.	The trainee will perform the procedure independently in all situations without any need for peer or written/online resource backup, and will also be able to adapt their technique when performing in non-ideal situations.

GROUP	PROCEDURE	CATEGORY		MASTERY LEVELS			
		Prevalence C common in EM	Importance LS life/limb/ sight saving	End PT	End AT1	End AT2	End AT3
Infection Control	Aseptic and sterile technique	C		3	4	5	5
Airway	Simple airway manoeuvres (chin lift, jaw thrust, head tilt, positioning) in an adult or a child	C	LS	3	4	5	5
Airway	Insertion of oropharyngeal or nasopharyngeal airway	C	LS	3	3	5	5
Airway	Insertion of a laryngeal mask airway	C	LS	2	3	4	4
Airway	Direct laryngoscopy, Insertion of oral ETT, use of RSI technique (including drugs, stylet, bougie)	C	LS	1	3	4	4
Airway	Video laryngoscopy	C	LS	1	2	3	4
Airway	Use of other rescue difficult airway device		LS	1	2	3	3
Airway	Securing and caring for ETT including during transport	C	LS	1	3	4	4
Airway	Insertion of cricothyroid needle and jet insufflation of oxygen, in an adult or a child		LS	1	1	2	3
Airway	Perform a cricothyroidotomy		LS	1	1	2	3
Airway	Emergency replacement of blocked or dislodged tracheostomy tube		LS	1	1	2	3
Airway	Extubation			1	1	3	3
Airway	Indirect laryngoscopy (use of dental mirror to examine for FB)			1	1	3	3
Airway	Use of other types of ETT (nasal, double lumen)				1	1	2
Breathing	Spirometry and Peak Flow measurement	C		2	3	3	4
Breathing	Use of oxygen delivery devices	C	LS	3	3	4	5
Breathing	Use of self-inflating bag for ventilation	C	LS	3	4	4	5
Breathing	Use of a non-self-inflating bag for ventilation				1	2	3
Breathing	Use of adult non-invasive ventilation device	C	LS	1	3	4	4
Breathing	Use of paediatric non-invasive ventilation device		LS		1	1	3
Breathing	Setting up a transport ventilator	C	LS	1	2	4	4
Breathing	Decompression needle/finger thoracostomy	C	LS	1	2	4	5
Breathing	Pleurocentesis	C		1	2	4	4
Breathing	Tube thoracostomy	C	LS	1	2	4	4
Circulation	Adult, Paediatric and Infant External Chest Compressions	C	LS	3	3	5	5
Circulation	Defibrillation	C	LS	3	4	4	5
Circulation	DC Cardioversion	C	LS	1	2	3	5
Circulation	External pacing		LS	1	2	3	3

GROUP	PROCEDURE	CATEGORY		MASTERY LEVELS			
		1= knowledge; 2= under direct supervision 3= independent; 4= proficient; 5= expert					
		Prevalence C common in EM	Importance LS life/limb/ sight saving	End PT	End AT1	End AT2	End AT3
Circulation	Venepuncture	C		4	5	5	5
Circulation	Adult peripheral intravenous access	C	LS	4	4	5	5
Circulation	Paediatric peripheral intravenous access	C	LS	2	3	4	4
Circulation	Insertion of a rapid infusion catheter		LS	1	3	3	4
Circulation	Intraosseous access	C	LS	2	3	4	5
Circulation	Arterial puncture for blood sampling	C		3	3	4	4
Circulation	Arterial line insertion	C		1	2	4	4
Circulation	Preparation & operation of transport monitoring equipment	C		1	3	4	4
Circulation	Insertion of a central venous line	C		1	1	3	4
Circulation	Emergency pericardiocentesis		LS	1	1	3	3
Circulation	Resuscitative thoracotomy		LS	1	1	1	3
Circulation	Insertion of a temporary pacing wire				1	1	1
Fluids	Preparation of an intravenous fluid or blood product line	C		3	4	4	4
Fluids	Insertion of a nasogastric tube or orogastric tube	C		3	4	4	4
Fluids	Insertion of an adult urinary catheter (female and male)	C		3	4	4	4
Fluids	Insertion of an infant urinary catheter (female and male)	C		1	2	4	4
Fluids	Suprapubic aspiration of urine in an infant	C		1	2	3	3
Fluids	Insertion of a suprapubic catheter			1	1	3	3
Fluids	Replacement of a suprapubic catheter	C		2	3	3	4
Fluids	Abdominal paracentesis and insertion of drain	C		2	3	4	4
Fluids	Insertion of oesophageal & gastric balloon devices		LS	1	1	3	3
Fluids	Emergency replacement of a dislodged gastrostomy tube	C		2	2	3	4
Disability (Neuro & Ortho)	Sizing and application of a rigid cervical collar	C	LS	3	3	4	5
Disability (Neuro & Ortho)	In-line cervical spine immobilisation	C	LS	3	3	4	5
Disability (Neuro & Ortho)	Full spinal immobilisation, log roll, and transfer	C	LS	3	3	4	5
Disability (Neuro & Ortho)	Emergent Fracture / Dislocation Reduction	C	LS	2	3	4	4
Disability (Neuro & Ortho)	Joint reduction - Digits	C		3	3	4	4
Disability (Neuro & Ortho)	Joint reduction – Shoulder, elbow, patella	C	LS	2	3	4	4

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Disability (Neuro & Ortho)	Joint reduction – Ankle	C	LS	2	2	3	4
Disability (Neuro & Ortho)	Joint reduction – Hip, knee		LS	1	2	3	3
Disability (Neuro & Ortho)	Fracture/Joint immobilisation - Removable Splint application	C		3	4	4	4
Disability (Neuro & Ortho)	Fracture/Joint immobilisation – Backslab application	C		3	3	4	4
Disability (Neuro & Ortho)	Fracture/Joint immobilisation – Circumferential casts application	C		2	3	4	4
Disability (Neuro & Ortho)	Application of sling/ collar and cuff	C		3	4	4	4
Disability (Neuro & Ortho)	Insertion of a fascial intra- compartmental monitor				1	1	2
Disability (Neuro & Ortho)	Application of a pelvic binding device	C	LS	2	3	4	4
Disability (Neuro & Ortho)	Application of traction splinting devices	C	LS	2	3	4	4
Disability (Neuro & Ortho)	Arthrocentesis (knee)	C		2	3	4	4
Disability (Neuro & Ortho)	Arthrocentesis (other joints)			2	3	3	3
Sedation delivery	Administration of procedural sedation	C		1	2	3	5
Sedation delivery	Administration of chemical restraint	C		2	3	3	5
Regional Anaesthesia	Use of topical anaesthesia	C		3	4	4	5
Regional Anaesthesia	Direct infiltration of local anaesthetic	C		3	4	5	5
Regional Anaesthesia	Digital Nerve Block	C		3	4	5	5
Regional Anaesthesia	Femoral or Fascia iliaca block	C		2	3	4	4
Regional Anaesthesia	Additional regional nerve blocks				1	1	3
Regional Anaesthesia	Haematoma block				1	1	3
Regional Anaesthesia	Intravenous regional anaesthesia and Biers Blocks				1	1	3
Wounds	Basic skin suturing techniques	C		3	4	5	5
Wounds	Alternate skin closure (eg. tissue adhesive, staples)	C		3	3	4	4
Wounds	Advanced suturing techniques	C		2	3	4	4
Wounds	Wound exploration, cleaning, irrigation, and debridement	C		2	3	4	4
Wounds	Superficial open wound dressing	C		3	3	4	4
Wounds	Open wound packing	C		2	3	3	4
Burns	Burn first aid	C		3	3	5	5
Burns	Debridement of burns	C		2	3	4	4

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Burns	Primary burn dressing	C		3	3	4	4
Burns	Escharotomy		LS	1	1	3	3
Minor Surgical	Removal of superficial & subcutaneous foreign bodies	C		3	3	4	4
Minor Surgical	Incision and drainage of simple, superficial abscesses	C		2	3	4	4
Minor Surgical	Drainage of a paronychia	C		2	3	4	4
Minor Surgical	Drainage of a subungual haematoma	C		1	3	3	4
Minor Surgical	Incision and drainage of a thrombosed external haemorrhoid	C		1	3	3	3
Minor Surgical	Drainage of peritonsillar abscess				1	1	2
Minor Surgical	Nail bed repair	C			1	2	2
Minor Surgical	Proctoscope insertion	C			1	1	3
O&G	Vaginal speculum insertion	C		3	3	4	4
O&G	Removal of products of conception from cervical os	C	LS	2	2	3	4
O&G	Use of foetal doppler	C		1	2	3	3
O&G	Spontaneous vaginal delivery		LS	2	2	3	3
Microbiology	Collection of blood culture	C		3	3	5	5
Microbiology	Lumbar Puncture and measurement of CSF opening pressure	C		2	3	4	4
Microbiology	Paediatric non-invasive urine collection	C		2	3	4	4
Microbiology	Collection of swabs	C		3	3	4	4
Microbiology	Nasopharyngeal aspirate collection	C		2	3	3	3
ENT	Removal of nasal foreign bodies	C		2	3	4	4
ENT	Removal of aural foreign bodies	C		2	3	4	4
ENT	Removal of laryngeal foreign bodies	C		1	2	3	3
ENT	Nasal speculum insertion	C		3	3	4	4
ENT	Nasal cautery	C		2	3	4	4
ENT	Anterior nasal packing	C	LS	3	3	4	4
ENT	Posterior nasal packing		LS	1	1	3	3
ENT	Aural toilet	C		2	3	3	3
ENT	Aural wick insertion	C		3	3	4	4
Eyes	Removal of corneal foreign bodies	C		2	3	4	4
Eyes	Direct ophthalmoscopy	C		3	3	3	4
Eyes	Indirect ophthalmoscopy				1	1	2
Eyes	Use of a slit lamp in the eye examination	C		2	3	4	4

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Eyes	Tonometry	C		2	3	3	3
Eyes	Eye irrigation	C	LS	3	3	4	4
Eyes	Application of an eye pad or shield	C		2	3	4	4
Eyes	Lateral canthotomy		LS	1	1	1	3
Dental	Joint reduction: Temporo-mandibular joint	C		2	2	3	4
Dental	Enlocation avulsed / extruded / intruded / laterally injured tooth	C		1	2	3	3
Dental	Temporary stabilisation of injured tooth	C		1	2	3	3
Dental	Haemostasis following dental extraction	C		1	2	3	3
Ultrasound	Detection of cardiac activity in cardiac arrest	C		1	2	4	4
Ultrasound	Performance of Focused Abdominal Sonography in Trauma (FAST) or EFAST	C		1	2	3	4
Ultrasound	Pneumothorax / haemothorax detection	C		1	2	3	3
Ultrasound	Detection & characterisation of an abdominal aortic aneurysm	C		1	2	3	3
Ultrasound	Guided Peripheral Vascular Access	C		1	1	3	3
Ultrasound	Guided Central Vascular Access	C		1	1	3	4
Ultrasound	Ultrasound guided nerve blocks			1	1	2	2
Ultrasound	Identification of distended bladder	C		1	2	3	4
Ultrasound	Soft Tissue Ultrasound				1	1	1
Ultrasound	1st Trimester Pregnancy Ultrasound				1	1	1
Ultrasound	Hepatobiliary Ultrasound				1	1	1
Ultrasound	Application of haemodynamic assessment protocols				1	1	1
Toxinology	Pressure immobilisation Bandage	C	LS	3	3	5	5
Toxicology	Gastric decontamination		LS	1	1	3	3
Toxicology	Whole Bowel Irrigation		LS	1	1	3	3
Environmental	Basic cooling techniques (external and IV fluids)	C	LS	3	4	4	4
Environmental	Advanced cooling techniques		LS	1	2	3	3
Environmental	Basic warming techniques (external and IV fluids)	C	LS	3	4	4	4
Environmental	Advanced warming techniques		LS	1	2	3	3